

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

US Immigration Reform PAC

ADDRESS (number and street) ▼

2700 35th Place NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20007-1407

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00253906

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sylvia Chip

Signature of Treasurer

Sylvia Chip

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

US Immigration Reform PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		11261.68
(b) Cash on Hand at Beginning of Reporting Period.....	11261.68	
(c) Total Receipts (from Line 19)	1225	1225
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	12486.68	12486.68
7. Total Disbursements (from Line 31)	3506.69	3506.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8979.99	8979.99
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

US Immigration Reform PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
01 / 01 / 2012

To:

M M / D D / Y Y Y Y Y
03 / 31 / 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

800

800

(ii) Unitemized

425

425

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

1225

1225

(b) Political Party Committees

0

0

(c) Other Political Committees

(such as PACs).....

0

0

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

1225

1225

12. Transfers From Affiliated/Other

Party Committees.....

0

0

13. All Loans Received

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0

0

(b) Levin Funds (from Schedule H5)

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

1225

1225

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

1225

1225

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	1506.69	1506.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1506.69	1506.69
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000	2000
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3506.69	3506.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3506.69	3506.69

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1225	1225
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1225	1225
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1506.69	1506.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1506.69	1506.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 10

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

US Immigration Reform PAC

Full Name (Last, First, Middle Initial)

A. Mr. Walter Kleiner

Mailing Address 1725 89th Place NE

City

Clyde Hill

State

WA

Zip Code

98004-3213

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : SA11AI-204-385-c

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

B. Mrs. Sharon Barnes

Mailing Address 437 Clinton Avenue

City

Brooklyn

State

NY

Zip Code

11238-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : SA11AI-380-382-c

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

800.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

US Immigration Reform PAC

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '01' with 4 segments lit (top, bottom, left, right). The second display shows '20' with 6 segments lit (top, bottom, left, right, and the two middle horizontal segments). The third display shows '2012' with 10 segments lit (all segments except the two middle horizontal segments).

Category/
TypeCategory/
Type

A diagram of a rectangular box with a length of 150 units. The box is shown in perspective, with a top edge and a bottom edge. The bottom edge is labeled with the number 150.

Category/
Type

156.6

456.60

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

US Immigration Reform PAC

A. Aristotle Publishing

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement	
PAC Software service charge	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

The first grid shows the number 03, with 'M' in the top-left and top-right positions, and 'D' in the middle-left and middle-right positions. The second grid shows the number 16, with 'D' in the top-left and top-right positions, and 'Y' in the middle-left and middle-right positions. The third grid shows the number 2012, with 'Y' in the top-left, top-right, middle-left, and middle-right positions.

Transaction ID : SB21B-364-414-e

Amount of Each Disbursement this Period

A diagram of a 1D lattice with 3 sites. The lattice is represented by a horizontal line with 3 sites marked by small circles. The sites are labeled 1, 2, and 3 from left to right. The lattice is part of a larger system, as indicated by the continuation of the line to the right.

Full Name (Last, First, Middle Initial)

B. Aristotle Publishing

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement PAC Software

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

The image shows three 10-pin D-sub connectors. The first connector is labeled '03' and has two pins labeled 'M'. The second connector is labeled '21' and has two pins labeled 'D'. The third connector is labeled '2012' and has four pins labeled 'Y'. The connectors are arranged horizontally and separated by slashes.

Transaction ID : SB21B-364-409-e

Amount of Each Disbursement this Period

Food Type	Number of people
Vegetables	120
Fruits	90
Grains	150
Meat	60
Dairy	30

Full Name (Last, First, Middle): _____

C. Integram

Full Name (Last, First, Middle Initial)

Mailing Address 22695 Commerce Center Court

City	State	Zip Code
Dulles	VA	20166-2037

Purpose of Disbursement Marketing

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '03' with two squares above it. The second display shows '29' with two squares above it. The third display shows '2012' with four squares above it. The displays are separated by slashes.

Transaction ID : SB21B-368-411-e

Amount of Each Disbursement this Period

642.09

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

795.09

1251.69

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

US Immigration Reform PAC

Full Name (Last, First, Middle Initial)

A. Lou Barletta For Congress

Mailing Address PO Box 128

City

Hazleton

State

PA

Zip Code

18201-0128

Purpose of Disbursement

Political Contribution

011

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2012

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2012

Transaction ID : SB23-388-405-e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

B. Paul Broun Committee

Mailing Address PO Box 6337

City

Athens

State

GA

Zip Code

30604-6337

Purpose of Disbursement

Political Contribution

011

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2012

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2012

Transaction ID : SB23-390-408-e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

C. King For Congress

Mailing Address PO Box 400

City

Early

State

IA

Zip Code

50535-0400

Purpose of Disbursement

Political Contribution

011

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2012

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2012

Transaction ID : SB23-367-410-e

Amount of Each Disbursement this Period

500

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

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SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 10

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

US Immigration Reform PAC

Full Name (Last, First, Middle Initial)

A. Allen West For Congress

Mailing Address PO Box 1028

City
Deerfield Beach

State

FL

Zip Code

33443-1028

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 29 / 2012

Transaction ID : SB23-392-412-e

Amount of Each Disbursement this Period

500

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

2000.00